



**Division of Regulation and Licensure
Section for Long Term Care Regulation**

LTC BULLETIN

P.O. Box 570, Jefferson City, MO 65102-0570
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Ice storm puts Missouri to the test



Late January 2009, ice storms swept through the southern part of Missouri causing approximately 40 long term care facilities to lose power. Routine checks were made by the Section for Long Term Care Regulation (SLCR) Region 2 staff to ensure the safety of the individuals at the facilities.

In light of this disaster, SLCR wants to remind long term care facilities of the emergency protocol. In 2007, the protocol was developed for communication between long term care facilities and SLCR during a disaster that results in a loss of a necessary service (electricity, water, gas, phone, etc.). The protocol was established to streamline communication so facilities can focus on what is most important – the safety and well-being of residents.

The protocol provided the cellular phone number corresponding to the region in which your facility is located. Facilities are encouraged to contact the regional office main office phone number during normal business hours as survey staff carry

the cell phone and may be conducting a survey or inspection during working hours and may not answer immediately.

If you have any questions about the protocol, you may contact Shelly Williamson, SLCR Operations Manager, at (573) 526-4872.

Emergency Protocol Phone Numbers

Region	Main Office Phone	Cellular Phone	Region	Main Office Phone	Cellular Phone
1 Springfield	(417) 895-6435	(417) 425-8780	5 Macon	(660) 385-5763	(660) 651-1468
2 Poplar Bluff	(573) 840-9580	(573) 778-6495	6 Jefferson City	(573) 751-2270	(573) 619-3338
3 Kansas City	(816) 889-2818	(816) 719-0089	7 St. Louis	(314) 340-7360	(314) 623-2852
4 Cameron	(816) 632-6541	(816) 632-9371			

Medicare 101

Medicare Advantage Plans are health care plans approved by Medicare and provided by private insurance companies. There are several forms: Health Maintenance Organizations (HMOs), Preferred Provider Organizations (PPO), Private Fee for Service (PFFS), Medicare Special Needs Plans (SNPs), and Medical Savings Accounts. These plans continue to grow in popularity. Because Advantage Plans add another choice for the Medicare beneficiary, there are many situations where healthcare providers may not know the best way to help Medicare consumers use these benefits. Here are some pointers that may help.

As with all health insurance it is important to know if the health care provider accepts the insurance. This is particularly important with Advantage Plans. A PPO may pay for out-of-network providers, but usually with a greater cost sharing for the Medicare beneficiary. PFFS plans do not require contracts with providers but the provider must accept the plan.

Advantage Plans must apply the same medical coverage guidelines as found with Original Medicare. Medicare beneficiaries

have the right to disagree with an Advantage Plan determination for denial of admission to or discharge from a skilled care unit. A written notice is required and appeals may be made to Primaris toll-free at (866) 902-1813.

Advantage Plans might not call for the three-day hospital inpatient stay requirement before admission into skilled care. A Medicare beneficiary dropping an Advantage Plan during a skilled nursing admission:

- does not guarantee skilled nursing coverage under original Medicare for that admission; and
- they may not have guarantee issue rights to purchase a Medigap policy so the patient "cost sharing" i.e., co-insurance, co-payments, and deductibles, may not decrease.

For further information contact the CLAIM Program at (800) 390-3330. CLAIM is the state health insurance assistance program (SHIP). CLAIM provides one-on-one assistance for Medicare beneficiaries and their caregivers to navigate the Medicare Program. A speaker's bureau is also available for professional groups and the public.

Second Business Update

Due to the revision of 19 CSR 30-85.032, skilled nursing and intermediate care facilities no longer need a second business approval for an adult day care program for **four or fewer participants**. This rule change aligns with 19 CSR 30-86.032, Physical Plant Requirements for Residential Care Facilities and Assisted Living Facilities.

The rules may be accessed from the Department of Health and Senior Services' Web site at: <http://www.dhss.mo.gov/NursingHomes/LawsRegs.html>.

If you have questions, contact the Section for Long Term Care Regulation at (573) 522-6154.

Buzzing with Activity

The Certificate of Need (CON) Program continues to buzz with activity.

At their March 30, 2009 meeting, the Missouri Health Facilities Review Committee (Committee) continued the process of reviewing and revising their rules. They reviewed the entire set of rules with the goal of further streamlining the CON process, updating the Criteria and Standards, and improving forms and processes.

Holding down the expansion of long term care beds is still an important issue. Residential care and assisted living facilities represent the greatest growth in long term care beds in Missouri. Both capacity and utilization are dropping. As of fourth quarter 2008, the overall occupancy rate for intermediate care and skilled nursing care facilities was 75.2% for licensed and available beds (72.0% for all licensed). For residential care and assisted living facilities, it was 76.6% for licensed and available beds (69.2% for all licensed). Yet, there are still 97 more approved CON projects to come on line.

Recently, three new members were appointed to the Committee. They are Senator Robin Wright-Jones, Democrat, St. Louis; Senator Eric Schmitt, Republican, Glendale; and Representative Jake Zimmerman, Democrat, Olivette. There are also two vacancies, which remain to be filled by Governor Nixon.



Background Checks Revisited

In the winter 2008 issue of the *LTC Bulletin*, the “Background Checks – Who Needs ‘Em?” article indicated that long term care facilities may request a criminal background check through a private investigation agency or a professional association, as long as the check was completed through the Missouri State Highway Patrol (MSHP). The MSHP is the central repository for criminal records and has records dating back to the 1940’s.

Some of the private investigation agencies or professional associations are inadvertently limiting the information being released to the facilities by placing time period constraints on the background checks. Facilities need to ensure that they receive the entire (no time constraints) criminal history on applicants in accordance with Section 660.317, RSMo, and verify that the agency or association provided the requested information. By complying with the requirements, facilities can protect Missouri’s residents as well as avoid being cited for an incomplete background check.

If you have questions, contact the Section for Long Term Care Regulation at (573) 526-8532.



Tuberculosis Testing Requirements *Frequently Asked Questions*

Missouri long term care facilities are required to meet the guidelines under the state regulation, 19 CSR 20-20.100, Tuberculosis Testing for Residents and Workers in Long Term Care Facilities. Below are some questions and answers to assist facilities to ensure compliance with the state regulations.

1. What type of long term care facilities have to comply with this regulation?

Missouri residential care facilities (RCF), intermediate care facilities (ICF), assisted living facilities (ALF), and skilled nursing facilities (SNF) must comply with this regulation.

2. What are the employee requirements for long term care facilities?

All new long term care facility employees and volunteers who work ten or more hours per week are required to obtain the Mantoux PPD two-step tuberculin test within one month prior to starting employment in the facility.

If the initial test is zero to nine millimeters, the second test should be given as soon as possible within three weeks after employment begins.

3. I hired an employee recently who worked at another long term care facility. Do we still have to complete the Mantoux PPD two-step tuberculin test?

If the employee has documentation that the Mantoux PPD two-step tuberculin test was completed and at least one subsequent annual test within the past two years, then the employee would not need to complete the Mantoux PPD two-step tuberculin test.

4. Are Mantoux PPD two-step tuberculin tests required annually for employees?

No. If the employee's initial Mantoux PPD two-step tuberculin test results were zero to nine millimeters, only the one-step PPD tuberculin test needs to be completed on an annual basis.

Tuberculosis Testing Requirements

Frequently Asked Questions

5. I hired an employee with a history of a positive Mantoux PPD test who had a chest x-ray, which ruled out active pulmonary disease. Does this employee need an annual chest x-ray?

No. However, there should be documentation in the employee's file of an annual evaluation to rule out signs and symptoms of tuberculosis disease.

6. Which employees should be considered for preventive medication?

An employee who is skin-test positive with a normal chest x-ray should be considered for preventive medication. Those who complete a recommended course of preventive medication need have no further testing for tuberculosis unless signs and symptoms, which are compatible with tuberculosis disease, are present.

7. What is the importance of documentation?

The facility is responsible for maintaining documentation that the initial Mantoux PPD two-step tuberculin tests and annual one-step tuberculin tests have been completed for all employees. If employees completed these tests at other locations, to include the local Health department, medical clinics, or other long term care facilities, copies of these documents must be maintained by the facility to show these tests have been completed.



If you have questions, please contact the Section for Long Term Care Regulation at (573) 522-9488,



Toll-Free Numbers

Elder Abuse and Neglect Hotline: 1-800-392-0210

Family Care Safety Registry: 1-866-422-6872

Alzheimer's Special Care Services Disclosure

Long term care facilities that provide care for persons with Alzheimer's disease by means of a special care unit or program are required by Missouri Revised Statute 198.510 to complete and submit the "Alzheimer's Special Care Services Disclosure" form (MO 580-2637) to the Section for Long Term Care Regulation. Along with this disclosure form, a document or brochure containing information on selecting an Alzheimer's special care program must be submitted. Failure to submit the disclosure form and brochure will delay the approval of the facility's application for license. This same information is also required to be disclosed to residents, their next of kin, designee or guardian at the time of admission.

The brochure, "Guide to Selecting an Alzheimer's Special Care Unit," and the disclosure form are available on the Department of Health and Senior Services' Web site at: <http://www.dhss.mo.gov/NursingHomes/AlzheimersSCU/>. Long term care facilities may copy and personalize the brochure with their logo.



New Director Heads Regulation & Licensure

Teresa Generous is the new Director for the department's Division of Regulation and Licensure (DRL). The division regulates and licenses hospitals, long term care facilities, adult day care, child care, emergency medical services, and other health services.

Teresa is an attorney with experience in the areas of health and commercial law. Prior to joining DRL, she practiced law in the St. Louis Metropolitan area. She has a Masters of Education and Counseling Psychology and work experience in the areas of mental health, drug and alcohol rehabilitation, and child abuse and neglect. Teresa has also previously worked for state government with the Department of Social Services.

Please join us in welcoming Teresa!

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The *LTC Bulletin* is published quarterly by the Section for Long Term Care Regulation and is distributed to all Missouri long term care facilities. Suggestions for future articles may be sent to Sally.McKee@dhss.mo.gov, or you may call (573) 526-8514.